PA	PAIGN CONTRIBUTIONS AND	IN OF GA	BURLUIUE, B	ARD WHAVBER	e of Nevada _
Name (pr	int) 1280 CAMPBEL CT, GARDNI	e (if applicable)	i sedio	775-78	District (if applicable)
Mailing A	ddress (include city and zip code)	prince, p	0 07970	Telephone No.	25"8501
E-Mail Ac	Idress				
Select A	ppropriate Box(es) CANDIDATE PAC E	AG POLP	RTY IND EXP	AMENDED A	NNUAL FILING
Annual Filing - Due January 15, 2004 Period: January 1, 2003 - December 31, 2003			FILE		
1	Damant #4 Dua Avenuet 24 2004				- A 0004
	Report #1 — Due August 31, 2004 ats in an Office with a 4-year term Period: Jan.	5, 2001 — Aug 26	5, 2004	AŬ	IG 4 2024
All others	Period: Jan.	20, 1998 — Aug : 1, 2004 – Aug. 26 . 5, 2002 – Aug 26	, 2004	D! SECR!	EAN HELLER ETARY OF STA
7	Report #2 Due — October 26, 2004	. 5, 2002 - Aug 20	, 2004		
	Period: Aug.	27, 2004 — Oct.	21, 2004	FOR O	FFICE USE ONLY
	Report #3 Due — January 15, 2005* Period: Oct.	22, 2004 — Dec. :	31, 2004		1
BAGs on		22, 2004 - Dec. 5			1
 Third I	Annual Filing – Due January 15, 2005 Period: January 1, 2004 – December 31, 2 Report suffices for 2005 Annual Filing if ca	004	filed Report Nos	1 and 2	
			a vepart voo.		Cumulative
	CONTRIBUTIONS SUMMARY				From Beginnin of Report Perio
				This Period	#1 through End
					Reporting Period
1.	Total Monetary Contributions Received in Excess	s of \$100	-	0	- C
2.	Total Monetary Contributions Received of \$100 c	or Less		Ô	O
		This Period	Cumulative From Beginning of		
			Report Period #1		
		Ð	Through End of This Reporting Period		
3.	Total Amount of Monetary Contributions		renou		
	Received (Add Lines 1 and 2)			O	6
4.	Total Value of In Kind Contributions Received in Excess of \$100	O	0		
	EXI	PENSES SU	MMARY		
5.	Total Monetary Expenses Paid in Excess of \$100)	_	Ô	0
	Total Monetary Expenses Paid of \$100 or Less Total Amount of All Monetary Expenses Paid		-	Ó	Ü
	(Add Lines 5 and 6)		ı -	<u>0</u>	O
О.	Total Value of In Kind Expenses in Excess of \$100	<u>0</u>	<i>ව</i>		
	•	AFF1044	10N		
Declare	Under Penalty of Perjury That the Foregoing	AFFIRMAT is True and C			
$\overline{1}$	MIN			a :	
N	KI NOS			24 Just	04
gnature				Date OF	17

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PAGE___OF_

Name (print)

Town OF GARDNERVILE, BOARD
Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE
N/A			
	-		
	·		
			·
·			
			· · · · · · · · · · · · · · · · · · ·

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Pari A Lindsph Name (print) Town or CARDIERYUE BOARD
Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES		CODE		
Office expenses	MA	A		
Expenses related to volunteers	NA	В		
Expenses related to travel	NA	С		
Expenses related to advertising	NA	D		
Expenses related to paid staff	NA	E		
Expenses related to consultants	NA	F		
Expenses related to polling	NA	G		
Expenses related to special events	NA	Н		
** Goods and services provided in have been paid	kind for which money would otherwise $\!$	1		
Other miscellaneous expenses	NA	J		
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)				

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

|

Name (print)

De De Pau Alius

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
. N/A			
15 to 18 to 1			
	-		

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4 of \$ >

IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

PAGE_5 OF \$7

PAUL A LINDSA¹
Name (print)

TOWN OF GARDNERVILLE BOARD

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE JF LOAN
NA				
•				
			·	

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Revised: Jan-04

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Pau A	LINDSAY
Name (print)	

Town of GARDHORULE BOARD

Office (if applicable)

District (if applicable)

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

NA			·
		-	
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